U.S. District Court for the Northern District Of Illinois Attorney Appearance Form

Case Title:		Case Nu	mb	er:		
An appearance is he	reby filed by the unders	signed as a	atto	rney for:		
Attorney name (type	or print):					
Firm:						
Street address:						
City/State/Zip:						
Bar ID Number: Telephone Number See item 3 in instructions)				Number:		
Email Address:						
Are you acting as lea	d counsel in this case?				Yes	No
Are you acting as loc	al counsel in this case?)			Yes	No
Are you a member of the court's trial bar?					Yes	No
If this case reaches trial, will you act as the trial attorney?					Yes	No
If this is a criminal case, check your status.			Retained Counsel			
		Appointed Counsel If appointed counsel, are you				
		a Federal Defender				
			CJA Panel Attorney			
general bar or be granted I declare under penalty of	this Court an attorney must leave to appear <i>pro hac vic</i> perjury that the foregoing is has the same force and effect	ce as provide s true and co	ed fo	or by local ct. Under 2	rules 83.12 th 8 U.S.C.§174	nrough 83.14. 16, this
Executed on						
Attorney signature:	S/(Use electronic signature	if the appea	ırand	ce form is	filed electron	ically.)